

EPA United States Environmental Protection Agency Washington, DC 20460 Work Assignment						Work Assignment Number 3-36				
						<input type="checkbox"/> Other <input type="checkbox"/> Amendment Number:				
Contract Number EP-D-14-032			Contract Period 09/16/2014 To 09/15/2019 Base Option Period Number 3			Title of Work Assignment/SF Site Name Tech&Mod_Resilient Infrast				
Contractor INDUSTRIAL ECONOMICS, INCORPORATED					Specify Section and paragraph of Contract SOW Section 4 and 6					
Purpose: <input checked="" type="checkbox"/> Work Assignment <input type="checkbox"/> Work Assignment Close-Out <input type="checkbox"/> Work Assignment Amendment <input type="checkbox"/> Incremental Funding <input type="checkbox"/> Work Plan Approval						Period of Performance From 09/16/2017 To 09/15/2018				
Comments: THE WORK ASSIGNMENT INCLUDES 400 HOURS FOR PREPARATION OF THE WORKPLAN/COST ESTIMATE AND TO BEGIN THE WORK ASSIGNMENT. THE CONTRACTOR SHALL PROPOSE THE HOURS NECESSARY TO COMPLETE ALL TASKS. NO PREVIOUSLY PERFORMED WORK SHALL BE DUPLICATED. SEE ATTACHED SOW.										
<input type="checkbox"/> Superfund						Accounting and Appropriations Data				<input checked="" type="checkbox"/> Non-Superfund
Note: To report additional accounting and appropriations date use EPA Form 1900-69A.										
SFO <input type="checkbox"/> (Max 2)										
Line	DCN (Max 6)	Budget/FY (Max 4)	Appropriation Code (Max 6)	Budget Org/Code (Max 7)	Program Element (Max 9)	Object Class (Max 4)	Amount (Dollars)	(Cents)	Site/Project (Max 8)	Cost Org/Code
1										
2										
3										
4										
5										
Authorized Work Assignment Ceiling										
Contract Period:		Cost/Fee:				LOE:				
09/16/2014 To 09/15/2019										
This Action:										
Total:										
Work Plan / Cost Estimate Approvals										
Contractor WP Dated:				Cost/Fee			LOE:			
Cumulative Approved:				Cost/Fee			LOE:			
Work Assignment Manager Name Jeremy Martinich <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: 202-343-9871 FAX Number:			
Project Officer Name Carolyn Blake <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: 919-541-5256 FAX Number:			
Other Agency Official Name <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: FAX Number:			
Contracting Official Name Natalia Fisher-Jackson <div style="display: flex; justify-content: space-between;"> <div>_____ (Signature)</div> <div>_____ (Date)</div> </div>							Branch/Mail Code: Phone Number: 919-541-3564 FAX Number:			